

L21000213141

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 715 SGR LLC

(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

GENTI LULO

(Contact Person)

715 SGR LLC

(Firm/Company)

611 CALADESI TRL

(Address)

ORLANDO, FL. 32807

(City/State and Zip Code)

For further information concerning this matter, please call:

GENTI LULO

(Name of Contact Person)

at ()

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 17, 2023

GENTI LULO
611 CALADESI TRAIL
ORLANDO, FL 32807

SUBJECT: 715 SGR, LLC
Ref. Number: L21000213141

We have received your document for 715 SGR, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Resignation must be signed by the person Resigning.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 523A00018995

SEP 05 2023



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: 715 SGR LLC

2. The Florida document/registration number assigned to this limited liability company is:
L21000213141

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 7/18/2023

4. I, ERMAL LULO, hereby withdraw/resign as a
(Print Name of Person Resigning)
MGRM
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Ermal Lulo

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)
Certified Copy: \$30.00 (Optional)

FILED
2023 SEP -5 PM 12:51
CLERK OF STATE
TALLAHASSEE, FLORIDA